

Exhibit B

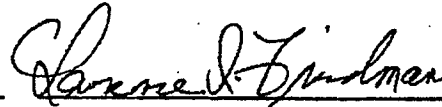
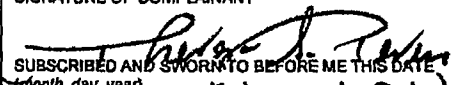
EEOC Form 5 (11/09)

520-2012-00204

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: Agency(ies) Charge No(s): <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC	
New York State Division of Human Rights and EEOC <i>State or local Agency, if any</i>			
Name (indicate Mr., Ms., Mrs.) Mr. Lawrence I. Friedmann		Home Phone (incl. Area Code) (718) 225 9165	Date of Birth 6-17-41
Street Address City, State and ZIP Code 245-30 Grand Central Parkway, #2F Bellrose, NY 11426			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Committee, or State or Local Government Agency That I Believe Discriminated Against Me or Others. (If more than two, list under PARTICULARS below.)			
Name Raymour & Flanigan		No. Employees, Members 500+	Phone No. (include Area Code) (516) 307-3693
Street Address City, State and ZIP Code 895 East Gate Blvd Garden City, NY 11530			
Name 		No. Employees, Members 	Phone No. (include Area Code)
Street Address City, State and ZIP Code 			
DISCRIMINATION BASED ON (Check appropriate box(es).) <input type="checkbox"/> RACE <input type="checkbox"/> COLOR <input type="checkbox"/> SEX <input type="checkbox"/> RELIGION <input type="checkbox"/> NATIONAL ORIGIN <input type="checkbox"/> RETALIATION <input checked="" type="checkbox"/> AGE <input checked="" type="checkbox"/> DISABILITY <input type="checkbox"/> GENETIC INFORMATION <input type="checkbox"/> OTHER (Specify)		DATE(S) DISCRIMINATION TOOK PLACE Earliest Latest January 2008 August 2011 <input type="checkbox"/> CONTINUING ACTION	
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): <p>I started working at Raymour & Flanigan as a sales associate in 2005. From January 2006 through December 2009, my job performance far exceeded Raymour & Flanigan's minimum volume requirements. In 2010, I had a flare up of Sciatica, which is a recurring disability of mine, which required a temporary accommodation. This flare up lasted for about 6 to 7 months. I was not able to stand for long periods of time without severe pain. I needed to sit for brief intervals while on the selling floor to calm the Sciatica pain. Lucy Goldstein would not grant my request for an accommodation. Raymour's refusal to grant my accommodation decreased my sales numbers dramatically, while also increasing my pain and discomfort. Although other employees were allowed to sit down at work without requesting an accommodation, I believe I was treated differently due to my disability and age.</p>			
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements	
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.	
Date 10/21/11		SIGNATURE OF COMPLAINANT Lawrence I. Friedmann	
Charging Party Signature		SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) 21st day of October, 2011	
		THERESA S. PETERS Notary Public, State of New York No. 01100373 Qualified in Bronx County Commission Expires Jan. 5, 2015	

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EEOC Form 5 (11/09)

CHARGE OF DISCRIMINATION This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.		Charge Presented To: _____ Agency(ies) Charge No(s): _____ <input type="checkbox"/> FEPA <input checked="" type="checkbox"/> EEOC
_____ State or local Agency, if any		and EEOC
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)):		
<p>I believe my age became a problem for my employer in 2011. In or about February 2011, Lucy Goldstein asked me my age and when I plan to retire. I did not tell her my age and said I plan to work for another 5 years. Thereafter, she began to call me "old man," while smiling. I realized that my age and disability were becoming issues for my employer. Every time she brought up my performance in 2010 and I mentioned my Sciatica, she would say "oh that excuse, again." In general, as 2011 progressed, other coworkers and managers would call me "old man." It made me feel uncomfortable and although I do not feel or act old, I realized that my age was becoming an issue with management above Lucy Goldstein. I complained about age and disability discrimination and nothing changed. Ultimately, I was terminated because of my age and disability in retaliation for my complaints of discrimination.</p>		
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.		NOTARY - When necessary for State and Local Agency Requirements
I declare under penalty of perjury that the above is true and correct.		I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief.
10/24/11 Date	 Charging Party Signature	SIGNATURE OF COMPLAINANT  SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year) 21 st day of October, 2011 THORESA S. PETERS Notary Public, State of New York R3: 02-902379 Qualified in Bronx County Commission Expires Jan. 5, 2015

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